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## FACSIMILE TRANSMITTAL SHEET

TO: Commissioner for Patents Mail Stop Amendment	FROM: Guy V. Tucker REG NO. 45,302
ATTN: EXAMINER: Steven O. DOUGLAS GROUP ART UNIT: 3771	PHONE NUMBER: 650-620-5501
FAX NUMBER: 1-571-273-8300	FAX NUMBER: 650-620-6396
PHONE NUMBER:	DATE: August 16 2007

TOTAL NO. OF PAGES INCLUDING COVER: 16

RE: Patent Application No.: 10/698,025  
Attorney Docket No.: 0150.00  
Confirmation No. 7124DOCUMENTS SUBMITTEDPTO/SB/21 Transmittal Form (1 page)  
Response to Restriction Requirement (10 pages)  
PTO/SB/22 Petition for Extension of Time (1 page and a duplicate)  
Power of Attorney and Correspondence Address Indication Form (1 page)  
Statement Under 37 CFR 3.73(b) (1 page)CERTIFICATE OF FACSIMILE TRANSMISSION

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Dated: 08/16/2007

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AUG 16 2007

PTO/SB/21 (04-07)

Approved for use through 09/30/2007. OMB 0651-0031  
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**TRANSMITTAL  
FORM**

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Total Number of Pages In This Submission

15

Application Number

10/698,025

Filing Date

October 30, 2003

First Named Inventor

Carlos Schuler

Art Unit

3771

Examiner Name

Steven O. DOUGLAS

Attorney Docket Number

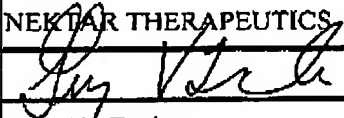
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**ENCLOSURES (Check all that apply)**

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|--|---|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>1) Response to Restriction Requirement and 2) Statement Under 37 CFR 3.73(h) |
|--|---|---|

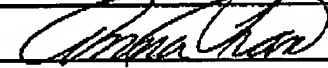
Remarks

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	NEKTAR THERAPEUTICS		
Signature			
Printed name	Guy V. Tucker		
Date	16 AUG 2007	Reg. No.	45,302

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Anna Tran	Date	08/16/2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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